## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Freedom Partners Action Fund, Inc.	C C00564765	
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination	
	05 04 2016	
Mailing Address PO BOX 16504	Amount	
City State Zip Code	900.00	
ALEXANDRIA VA 22302	Transaction ID : SE24.581  Date of Disbursement or Obligation	
Purpose of Expenditure DIGITAL MEDIA PRODUCTION  Category/ Type	05	
Name of Federal Candidate Support	Office Sought: House District:	
CATHERINE CORTEZ MASTO Oppose	President Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 1128589.29	Disbursement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
FREEDOM PARTNERS CHAMBER OF COMMERCE, INC.	05 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 2200 WILSON BLVD.		
STE. 102-533	Amount	
City State Zip Code	250.00	
ARLINGTON VA 22201	Transaction ID : SE24.600  Date of Disbursement or Obligation	
Purpose of Expenditure EMAIL MARKETING EXPENSE  Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support	Office Sought: House District:	
CATHERINE CORTEZ MASTO  Oppose	President Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 1128589.29	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶	
•		
(a) SUBTOTAL of Itemized Independent Expenditures	9250.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) SOBTOTAL OF Officernized independent Experiations		
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Thomas F. Maxwell III [Electronically Filed] Date	05 18 2016	
Signature		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.	C C00564765
Check if 24-hour report X 48-hour report New report Amends re	eport filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Conservative Connector, LLC	05 / 17 / 2016
Mailing Address 190 Monroe Avenue Ste. 500	Amount
	20.57
City State Zip Code Grand Rapids MI 49503	28.57  Transaction ID : SE24.001  Date of Disbursement or Obligation
Purpose of Expenditure EMAIL MARKETING EXPENSE (Estimate)  Category/ Type	Man / Dad / Yayayay
Name of Federal Candidate Support	t Office Sought: House District:
CATHERINE CORTEZ MASTO  CATHERINE CORTEZ MASTO  Oppose	
Calendar Year-To-Date Per Election for Office Sought  1128589.29	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
THE SINGULARIS GROUP, LLC	05 / 18 / 2016
Mailing Address PO BOX 9265	Amount
City State Zip Code	72681.70
SHAWNEE MISSION KS 66201	Transaction ID : SE24.598  Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Expense  Category/ Type	05 11 2016
Name of Federal Candidate Suppor	t Office Sought: House District:
CATHERINE CORTEZ MASTO Oppose	
Calendar Year-To-Date Per Election for Office Sought  1128589.29	Disbursement For:  Primary  General 2016  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	72710.27
(a) COLICINE OF ROMEOU Mappingon Experiance	12110.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or ager party committee) any political party committee or its agent.	
Thomas F. Maxwell III  [Electronically Filed]  Signature	Date 05 18 2016

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
Freedom Partners Action Fund, Inc.		C C00564765	
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee THE SINGULARIS GROUP, LLC		Date of Public Distribution/Dissemination	
Mailing Address PO BOX 9265		05 18 2016 Amount	
City State	Zin Codo	6600.00	
SHAWNEE MISSION KS	Zip Code 66201	6690.99  Transaction ID : SE24.607  Date of Disbursement or Obligation	
Purpose of Expenditure Direct Mail Expense	Category/ Type	05 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate	Support Office	ce Sought: House District:	
CATHERINE CORTEZ MASTO	X Oppose	President Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought	1128589.29 Disk 2016	oursement For: Primary	
Full Name of Payee I360		Date of Public Distribution/Dissemination	
Mailing Address PO BOX 37046		05 18 2016 Amount	
City State BALTIMORE MD	Zip Code 21297	2990.69  Transaction ID : SE24.002  Date of Disbursement or Obligation	
Purpose of Expenditure Direct Mail Expense	Category/ Type	05 / 17 / 2016	
Name of Federal Candidate	Support Office	ce Sought: House District:	
CATHERINE CORTEZ MASTO	X Oppose	President State: NV	
Calendar Year-To-Date Per Election for Office Sought	1128589.29 Dist 201	oursement For:  Primary	
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures	·		
(b) 300101AL of officernized independent Expenditures	•	7 7 7	
(c) TOTAL Independent Expenditures	·····	91641.95	
Under penalty of perjury I certify that the independent exper with, or at the request or suggestion of, any candidate or aut party committee) any political party committee or its agent.			
Thomas F. Maxwell III Signature	77 . • 77 77•7 77	05 18 2016	